



Education Maintenance Allowance (EMA)

School Session 2017/2018

This form is for young people who attend a school, activity agreement, or are home educated within the Moray Council area. You can NOT use this form to apply for an EMA at college - contact your college directly.

Before you complete this form please read the guidance booklet. Write in BLOCK CAPITALS using black or blue pen.

COMPLETE FORM IN BLACK OR BLUE INK

FULL NAME OF STUDENT	
SCHOOL / LEARNING CENTRE	
DATE OF BIRTH	SQA Candidate Number:

Have you received an EMA before? YES ☐ NO ☐

A new application must be made each academic year including all original documentation needed to complete the assessment. Applications maybe submitted without documents in order to meet deadline.

DATA PROTECTION ACT

The Council is under obligation to manage public funds properly. Accordingly, the information that you provide will be used to ensure all sums due to the Council are paid timeously, e.g. by identifying persons who are non payers of council tax and to improve the uptake of benefits.

The information may also be used to prevent and detect fraud. It is also possible that this information may be shared for the same purposes with public bodies, including neighbouring councils or other organisations which handle public funds.

- Education Maintenance Allowance (EMA) is a programme funded by the Scottish Government and administered by Local Authority Education Departments for schools throughout Scotland. The Scottish Government and Local Authorities are controllers in relation to your information.
- The information you supply shall be used for the purposes of assessment, award, payment, and where necessary, recovery of the EMA and we will provide information to the Scottish Government, all in accordance with the requirements in the Scottish Government EMA (Scotland) Business Model.
- We may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information about you from certain third parties, or give information to them, to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, for research or statistical purposes, as permitted by law. These third parties include other government departments.
- We will not disclose information about you to anyone outside our Local Authority unless the law permits us to.

OFFICIAL USE ONLY

Date application received:	1st check:	Date award letter sent:	Single student rule	
			Multiple student rule	
		EMA start date:	Autumn intake	
	2nd check:		Winter intake	
		Date refused:	Award	
		Reason for refusal:	Provisional award	
			Refused	
			EMA Reference	
FOR OFFICIAL NOTES				

Part A

Section I (A): PERSONAL DETAILS – Completed by Student

Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of Birth (Day/Month/Year)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name(s)	<input type="text"/>								
Surname(s)	<input type="text"/>								
Email address of applicant	<input type="text"/>								
Current Home Address	<input type="text"/>								
	<input type="text"/>								
Postcode	<input type="text"/>								
Home Telephone	<input type="text"/>				Mobile	<input type="text"/>			

Section I (B): PERSONAL NATIONALITY AND RESIDENCY DETAILS

How long have you lived in the United Kingdom? From (Day/Month/Year)

Have you lived at your present address for longer than 3 years?

Yes ☐

No ☐

If no, please tell us your previous address(es) within the last 3 years, including those abroad.

	Address 1	Address 2
From	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
To	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Address	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>

Residency: please tick the relevant box:

UK ☐ EU/EEA/Swiss National ☐ Settled Status/Exceptional Leave ☐ None of these ☐

Refugee Status/Temporary Protection/Humanitarian Protection ☐ From

If required, please use the additional information page on page 4.

Section 2: COURSE/SCHOOL DETAILS – Completed by Student

Name of School

Are you attending school/college for at least 21 guided learning hours each week? Yes ☐ No ☐

If no, do you have flexible study arrangements to meet your particular needs; Yes ☐ No ☐

i.e. due to a medical condition? or you are a young carer?

Please state reason why you will be attending school for less than 21 guided learning hours.

Please use additional information page if required.

Which year of study will you be undertaking? S4 ☐ S5 ☐ S6 ☐ Other ☐

Section 3: BANK/BUILDING SOCIETY ACCOUNT DETAILS – Completed by Student

Name of person holding account

Is the account holder the EMA student?

Yes ☐

No ☐

If no, please state reason on additional information page.

Name and Address of
your Bank/Building Society

Sort Code (6 digits)

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Account Number (8 digits)

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Roll/Reference Number (if applicable)

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Any changes to your bank/building society account must be made in writing immediately to Moray Council, Education & Social Care.

Section 4: INDEPENDENT STATUS – Completed by Student

Do you receive Income Support or contributions-based Employment and Support Allowance in your own right? (please provide evidence)

Yes ☐

No ☐

If yes, are you living under the care of the Local Authority or with foster parents?

Yes ☐

No ☐

(Please provide a letter from your Social Worker)

Section 5: FAMILY DETAILS – Completed by Student

Who do you live with? (please tick all that apply)

Mother ☐
Mother's partner ☐
Grandparent(s) ☐
Other adults ☐

Father ☐
Father's partner ☐
Foster parent(s) ☐
please specify

On my own ☐
EMA Applicant's partner ☐
In care ☐

Lone parent household?

Yes ☐

No ☐

How many dependent children in the household?

If yes, please provide proof e.g. Council Tax Notice showing single household discount

Full Name of Other Dependents

Date of birth

Nursery/School/Learning Centre

Parent/Carer 1

Parent/Carer 2

Name (include title)

Permanent Address

Postcode

Relationship to Applicant

Occupation(s) held
during tax year 2016/17

Marital Status

Contact Number

EMA applicants must now sign and date the Student Declaration at Section 7(A)

Section 6: Household Income – Completed by Parent(s)/Carer(s)

Have you included all pages of a Tax Credit Award Notice (TCAN) TC602 with your application form. This should show the actual household income for 2016/17 and not an estimate.

Yes ☐

No ☐

Have you included proof of guardianship,

eg. Child Benefit letter

Yes ☐

No ☐

Have you included proof of lone adult status?

eg. Council Tax notice showing single occupancy status discount

Yes ☐

No ☐

If yes, please sign and date the Declaration at Section 7(B).

If you have answered **no** above, then you need to indicate below which income you are receipt of. We will need proof of all income for the 2016/17 financial year, proof of guardianship (ie. child benefit) and if you are a lone-parent then a 2017/18 Council Tax Bill will be required showing 25% reduction.

Are you in receipt of any benefits?

Yes ☐

No ☐

If yes, please have part C completed by Jobcentre Plus (benefits include: Carer's Allowance, Income Support, Jobseeker's Allowance, Employment & Support Allowance, Incapacity Benefit, Disability Living Allowance, Bereavement Allowance etc.)

Do you have an income from employment?

Yes ☐

No ☐

If yes, please provide your P60 to April 2017 for each parent / carer

Are you self-employed or in receipt of non-employment income?

Yes ☐

No ☐

Please indicate your gross profit for 2016/17
Please provide an SA302 from HMRC

If you have not submitted an SA302 please have part B completed by your accountant.

£

Do you have income from savings, shares, investments, trusts dividends etc.?

Yes ☐

No ☐

if yes, please provide certificates / official documents to April 2017 as evidence

Do you have a state pension?

Yes ☐

No ☐

If yes, please provide your P60 for any private pension

Have you ceased employment in the 2016/17 financial year?

Yes ☐

No ☐

If yes, please provide your P45

Were you a student in financial year 2016/17?

Yes ☐

No ☐

If yes, please provide your SAAS Award Letter

Do you have any other household income?

Yes ☐

No ☐

If yes, please provide details and evidence

Do you have any deductible allowance to declare such as any professional fees or pension scheme payments not already deducted from P60 etc.?

Yes ☐

No ☐

If yes, please provide details and evidence

Additional Information

Section 7(A): STUDENT DECLARATION

This section must be completed by the student applying for an EMA award.

- I declare that all the answers given in this form are true.
- I have read the guidance and understand and accept my obligations.
- I understand that if I give false information or withhold information my EMA application will be cancelled and, if necessary, action will be taken to recover any money paid to me.
- I undertake to refund any sum arising from an overpayment for any reason.
- I understand that if I do not keep to the conditions of my Learning Agreement/Activity Agreement, payments may be withheld.
- I understand that if I leave school/Activity Agreement, I will not be eligible for any further payments.
- I understand that relevant information may be passed on to third parties within the Local Authority.
- I give permission for the local authority to release information relating to my independent status to EMA team.

Signature of Applicant Date

Name (PRINT)

If the student is unable to sign this form due to additional support needs, please leave blank and tick box provided. ☐

EMA applicants must now complete and sign the Learning Agreement on pages 11 & 12

Section 7(B): PARENTAL/PARTNER/CARER DECLARATION

This section must be completed if the applicant is under 18 years of age or the award has been assessed against the income of the applicant's parent, spouse, or carer.

- I/We declare that to the best of my/our knowledge and belief all the information given, in connection with this application, is full and correct in every respect.
- I/We undertake to provide any additional information which may be required by the Local Authority to verify the particulars given and also to inform the Local Authority immediately of any alteration in these particulars.
- I/We undertake to inform the Local Authority of any changes in financial circumstances which may affect the award.
- I/We understand that if my/our child does not keep to the conditions of their Learning Agreement/Activity Agreement, payments may be withheld.
- I/We understand that if my/our child leaves school/Activity Agreement, he/she will not be entitled to any further payments.
- I/We consent to the undertaking signed by the student above.
- I am/We are aware that my/our child is bound by the conditions set out by the EMA guidance.
- I/We give permission for the Local Authority to release information relating to my/our household circumstances to EMA team for proof of single occupancy.

Parent/Carer 1

Signed Date

Name (PRINT)

Parent/Carer 2

Signed Date

Name (PRINT)

Parent/Carer must now sign and date the Learning Agreement on page 12

Education Maintenance Allowances (EMA)

Application Contact Address

A FIRST CLASS STAMP WILL NOT BE SUFFICIENT POSTAGE WHEN SENDING IN YOUR COMPLETED APPLICATION FORM. POSTAGE CHARGES ARE NOW BASED ON WEIGHT AND SIZE. MORAY COUNCIL WILL NOT ACCEPT FORMS WITH INSUFFICIENT POSTAGE. IT IS ADVISABLE TO OBTAIN A PROOF OF POSTAGE RECEIPT.

Please complete the application form and send it to the following address:

Education & Social Care
Moray Council
High Street
Elgin
IV30 1BX

If any have any queries please contact:
EMAMoray@moray.gov.uk
01343 563338

IF YOU ARE POSTING YOUR APPLICATION YOU MUST ENCLOSE A STAMPED ADDRESSED ENVELOPE FOR PERSONAL DOCUMENTS TO BE RETURNED.

Part B

Parent/Carer

ACCOUNTANT'S CERTIFICATE FOR SELF EMPLOYED – Completed by accountant

If both parent(s)/carer(s) are self employed, each is required to complete Part B separately.

NB: application may be submitted with Part B to follow.

Student Name Date of Birth

Parent/Carer 1

Parent/Carer 2

Name

Trading Name
Business Address

Estimated profits for trading year 2017/18

ADD

Charges not allowable for Tax purposes

DEDUCT

Capital Allowances

Taxable profits

Please provide any details of any other income received during trading year 2017/18.

Self-employed Parent/Carer 1

Self-employed Parent/Carer 2

Income

Accountant's Name

Accountant's Address

Accountant's Signature

NB: An SA302 is still required in order to finalise any award. This may have to be requested from HM Revenue & Customs.

Accountant's Official Stamp

Page intentionally left blank

Part C

Parent/Carer

CERTIFICATE OF BENEFITS RECEIVED – Completed by PARENT/CARER

To be completed by student's parent/carers before submitting to DWP

Student's Name

Parent/Carer 1

National Insurance

Parent/Carer 2

National Insurance

Address

I authorise the DWP to give information relating to my benefits allowances

Signature Parent/Carer 1

Signature Parent/Carer 1

You should now take this form to your local DWP (Jobcentre Plus) Office.

To be completed by the Department of Work & Pensions for the district in which the parent/carers is/was registered.

Please complete details of benefits **at any time during the financial year 2016/17**

Parent/Carer 1	Type of Benefit	Taxable	Non-taxable
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>

Parent/Carer 2

From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>
From <input type="text"/> To <input type="text"/> £ <input type="text"/> /week	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signature of Manager/Clerk

Print Name

Date

DWP Office

DWP Stamp

Page intentionally left blank

Education Maintenance Allowance (EMA)

Learning Agreement – School Session 2017/2018

This page is for young people who attend school

COMPLETE FORM IN BLACK OR BLUE INK

Do not remove this page from the Application Form.

Please complete this page (leave the Study Programme table blank) and sign the declaration on page 12. If you are awarded an EMA you will be asked to meet with your guidance teacher. The EMA Administrator will send this page to the school so that your guidance teacher can sign it. EMA Payments can not start until the school has received and authorised this page.

All information is held in compliance with the Data Protection Act 1998.

FULL NAME OF STUDENT	
SCHOOL	
DATE OF BIRTH	SQA Candidate Number
YEAR & CLASS	GUIDANCE TEACHER

STUDY PROGRAMME

(please leave this table blank – you will be asked to meet with your guidance teacher; who will help you complete this part of the form)

Subject	Level

Special arrangements e.g. Timetable

Targets*

- Homework will be completed to the best of my ability and handed in on time
- Class work will be completed to the best of my ability
- I will arrive at school and in class on time
- I will maintain the agreed level of attendance
- My conduct will reflect my positive approach to learning

I understand that if I do not make an effort to achieve these targets my Education Maintenance Allowance may not be paid.

* In the event that a young person lacks capacity to understand this agreement, the parent/carer undertakes to support the pupil to achieve these targets.

DECLARATION

TO BE COMPLETED BY STUDENT

I agree to the terms of this learning agreement.

I understand that:

- My study programme forms part of this agreement
- I must ensure that all requirements of my study programme are met
- I must seek appropriate careers advice before changing my study programme
- I must support the school's aim and comply at all times with standards of behaviour and conduct
- I must maintain 100% attendance (other than absences authorised by the school)
- I must notify the school about absence on or before the first day of absence
- I understand that if I am late more than twice in one week my EMA will be stopped

Student Signature

Signed Date

Name (PRINT)

Parent/Carer's Counter Signature

Signed Date

Name (PRINT)

TO BE COMPLETED BY THE SCHOOL

I confirm that the student has had the terms of the EMA explained and has agreed to comply with the terms and conditions of award of Educational Maintenance Allowance. I or one of my colleagues will notify Moray Council should the student fail to meet any of the EMA requirements at any point during the school year.

Signed Date

Name (PRINT)

Designation
(on behalf of the school)